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I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Mail Stop 16, Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

REQUEST FOR REFUND

Patent Application

Docket No. GJE-74 205 AUS - 1 PM 17

Serial No. 09/913,443

US PATENT & TRADEMARK OFFICE

July 27, 2005

Glenn P. Ladwig, Patent Attorney

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner

Celine X. Qian

Art Unit

1636

**Applicant** 

Jack Price

Serial No.

09/913,443

Filed

August 14, 2001

Confirm. No.:

9647

For

Transplantation of Haematopoietic Cells

Mail Stop 16
Director of the U.S. Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

#### **REQUEST FOR REFUND**

Sir:

On May 2, 2005, the applicant submitted an Amendment Transmittal Letter authorizing payment for five additional total claims for the above-referenced application. The Amendment Transmittal Letter correctly indicated that the small entity Claims in Excess of Twenty Fee of \$125.00 should be charged to Deposit Account No. 19-0065. A copy of the Amendment Transmittal Letter filed in the subject application is enclosed for reference.

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Docket No. GJE-74 Serial No. 09/913,443

The Monthly Statements of Deposit Account dated May 31, 2005 and June 30, 2005 for Deposit Account No. 19-0065 indicate that the Claims in Excess of Twenty Fee was charged to our deposit account twice. Copies of the pertinent portions of the May 31, 2005 and June 30, 2005 Monthly Statements of Deposit Account 19-0065 are enclosed for reference.

The applicant should have only been charged one time for the Claims in Excess of Twenty Fee. Accordingly, the applicant respectfully requests a refund of \$125.00 be credited to Deposit Account No. 19-0065.

Respectfully submitted,

Glenn P. Ladwig

Patent Attorney

Registration No. 46,853

Phone No.:

352-375-8100

Fax No.:

352-372-5800

Address:

Saliwanchik, Lloyd & Saliwanchik

A Professional Association

P.O. Box 142950

Gainesville, FL 32614-2950

GPL/mv

Attachments: Copy of Amendment Transmittal Letter

Copy of May 31, 2005 Monthly Statement of Deposit Account; control no. 44 Copy of June 30, 2005 Monthly Statement of Deposit Account; control no. 9

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AMENDMENT TRANSMITTAL LETTER			ATTORNEY'S DOCKET NO. GJE-74
SERIAL NO. 09/913,443	FILING DATE August 14, 2001	EXAMINER Celine X. Qian	GROUP ART UNIT
INVENTION			
Transplantation of	Haematopoietic Cells		

## TO THE COMMISSIONER OF PATENTS AND TRADEMARKS:

Transmitted herewith is an amendment in the above-identified application.



Small entity status of this application under 37 CFR 1.27 has been established by a verified
statement previously submitted.

Applicant claims small entity status.

A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

□ No additional fee is required.

The fee has been calculated as shown below:

(1)

(2)

(3)

**SMALL ENTITY** 

OTHER THAN A SMALL ENTITY

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	* 25	MINUS	** 20	5
INDEP.	• 3	MINUS	*** 3	0
FIRST PRE	ESENTATION OF MU	LTIPLE DEP	ENDENT CLAIM	0

RATE	ADDIT. FEE	<u>OR</u>
\$25	\$125.00	
\$100	\$ 0.00	
\$180	\$ 0.00	
Total addit. fee	\$125.00	<u>OR</u>

RATE	ADDIT. FEE
\$50	\$0.00
\$200	\$0.00
\$360	\$0.00
Total addit.	\$0.00

\*\* If the Highest No. Previously Paid For IN THIS SPACE is less than 20, enter "20."

\*\*\* If the Highest No. Previously Paid For IN THIS SPACE is less than 3, enter "3."

The Highest No. Previously Paid For (Total or Indep.) is the highest number found in the appropriate box in Col. 1.

COPY

Ø	Please charge my Deposit Account No. 19-0065 in the amount of \$ 125.00
	A check in the amount of \$ to cover the filing fee is enclosed.
Ø	The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-0065. Two additional
	copies of this paper are enclosed.
	Any additional filing fees required under 37 CFR 1.16.

Any patent application processing fees under 37 CFR 1.16.

May 2, 2005

(date)

(signature)

<sup>\*</sup> If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

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THE TRADE WITH	ENDMENT TRANSI	MITTAL LETTER	ATTORNEY'S DOCKET NO. GJE-74
ERIAL NO.	FILING DATE	EXAMINER	GROUP ART UNIT
9/913,443	August 14, 2001	Celine X. Qian	1636
NVENTION	Trogast 14, 2001		
• · · · · · - ·	Hacmatopoietic Cells		

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statement previously submitted.

Applicant claims small entity status. 8

A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed. 0

(3)

No additional fee is required. 0

The fee has been calculated as shown below:

(1)

(2)

SMALL ENTITY

OTHER THAN A SMALL ENTITY

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	• 25	MINUS	•• 20	5
INDEP.	• 3	MINUS	••• 3	0
FIRST PR	ESENTATION OF MU	LTTPLE DEP	ENDENT CLAIM	0

RATE	ADDIT. FEE
\$25	\$125.00
\$100	\$ 0.00
\$180	\$ 0.00
Total addit. fee	\$125.00

<u>OR</u>

<u>OR</u>

RATE	ADDIT. FEE
\$50	\$0.00
\$200	\$0.00
\$360	\$0.00
Total addit. fee	\$0.00

Please charge my Deposit Account No. 19-0065 in the amount of \$\_125.00 

to cover the filing fee is enclosed. A check in the amount of S

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-0065. Two additional copies of this paper are enclosed.

Any additional filing fees required under 37 CFR 1.16.

Any patent application processing fees under 37 CFR 1.17.

May 2, 2005 (date)

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06/14/2005 ZADRMS

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125.00 DA

<sup>•</sup> If the entry in Col. 1 is less than the entry in Col. 2, write \*0\* in Col. 3.

<sup>\*\*</sup> If the Highest No. Previously Paid For IN THIS SPACE is less than 20, enter "20."

<sup>\*\*\*</sup> If the Highest No. Previously Paid For IN THIS SPACE is less than 3, enter "3."

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